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APPLICANTS
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**** FOREIGN APPLICATIONS *******
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance /B.R.M./ Initials	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWINGS 10	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 1
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